U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number **U** - 7057

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

3. Name and address of person filing. Name Joseph J Dougherty P.O. Box, Bldg., Room No., if any Street 11600 Norcom Road City Philadelphia State Pennsylvania ZIP Code + 4 19154 5. Position in labor organization. Financial Secty Treas/Business Mgr Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 7.a. Nature of interest, Transaction, or Income. 7.b. Amount.	
P.O. Box, Bldg., Room No., if any Street 11600 Norcom Road City Philadelphia State Pennsylvania ZIP Code + 4 19154 A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. A. Name and address of Employer (including trade name, if any). Name Trade Name, if any: 7.b. Amount.	
P.O. Box, Bldg., Room No., if any Street 11600 Norcom Road City Philadelphia State Pennsylvania ZIP Code + 4 19154 State Pennsylvania ZIP Code + 4 19154 5. Position in labor organization. Financial Secty Treas/Business Mgr Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	
Street 11600 Norcom Road City Philadelphia State Pennsylvania ZIP Code + 4 19154 State Pennsylvania ZIP Code + 4 19154 5. Position in labor organization. Financial Secty Treas/Business Mgr Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	
City Philadelphia State Pennsylvania ZIP Code + 4 19154 State Pennsylvania ZIP Code + 4 19154 State Pennsylvania ZIP Code + 4 19154 5. Position in labor organization. Financial Secty Treas/Business Mgr Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	
State Pennsylvania ZIP Code + 4 19154 State Pennsylvania ZIP Code + 4 19154 5. Position in labor organization. Financial Secty Treas/Business Mgr Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	
5. Position in labor organization. Financial Secty Treas/Business Mgr Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	***************************************
(except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	eri inversivence in en mass.
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.	
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	
Trade Name, if any: P.O. Box, Bldg., Room No., if any 7.b. Amount.	***************************************
P.O. Box, Bldg., Room No., if any 7.b. Amount.	
7.b. Amount.	
general and interface and an all an all an all and interface and an all an all an all and interface and an all an al	
Some and approximate and report from the contract of the contr	
City	
State ZIP Code + 4	
Signature	
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed Joseph J. Waugherty on 8-8-05 215-676-3000	he
Date Telephone Number	he

Name of Person Filing Joseph Dougherty	4000	File Number U -
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or included the policy of the dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the busines vely seeking to represent, or directly to, or otherwise	s
8. Name and address of Business (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organiza b. Trust c. Employer	tion
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ng.
Name Iron Workers Local Union 401 Trade Name, if any: Apprentice Training Fund P.O. Box, Bldg., Room No., if any		entice Annual Awards Banquet
Street 11600 Norcom Road	11.b. Approximate dollar valu	te of such dealing. \$103
City Philadelphia	12.a. Nature of interest held	
	gonition of the second	
State Pennsylvania State Pennsylvania ZIP Code + 4 19154		
termentalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalemental	12.b. Amount.	
termentalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalementalemental	12.b. Amount.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	12.b. Amount.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	12.b. Amount. r parts A and B above) or other thing of value.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	12.b. Amount. r parts A and B above) or other thing of value.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	12.b. Amount. r parts A and B above) or other thing of value.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	12.b. Amount. r parts A and B above) or other thing of value.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	12.b. Amount. r parts A and B above) or other thing of value.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	12.b. Amount. r parts A and B above) or other thing of value.	
State Pennsylvania ZIP Code + 4 19154 C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	12.b. Amount. r parts A and B above) or other thing of value.	

Name of Person Filing Joseph Dougherty	File Number U-	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street	c. Employer	
City		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Iron Workers District Council	Union Trustee Attendance at Quart Welfare and Pension Board Meeting	erly Health and s 6/24/04.
Trade Name, if any: Health Benefits and Pension Plans	Expenses - \$146	
P.O. Box, Bldg., Room No., if any		
Street 6401 Castor Avenue		
City Philadelphia		
State Pennsylvania ZIP Code + 4 19149	11.b. Approximate dollar value of such dealing.	\$146
	12.a. Nature of interest held or income received.	-the control of the c
	12.b. Amount.	

Name of Person Filing Joseph Dougherty	File Number U-
Name of Gastrining Joseph Dougherty	The Number 6 -

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	9. Business deals with: a. Labor Organization b. Trust c. Employer	
City		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Tron Workers Local Union 401 Trade Name, if any: Annuity Fund P.O. Box, Bldg., Room No., if any Street 11600 Norcom Road City Philadelphia State Pennsylvania ZIP Code + 4 19154	Plan Manager Attendance at Quarte Meetings. Meals - \$49.00 11.b. Approximate dollar value of such dealing.	rly Annuity Board
persodence and reference and respect to the respect	12.a. Nature of interest held or income received.	E
	12.b. Amount.	

Name of Person Filing Joseph Dougherty File Number U-		
	Name of Person Filing Joseph Dougherty	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Spear, Wilderman, Borish, Endy, Spear & Run Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 230 South Broad Street, Suite 1400 City Philadelphia	Flowers - \$98.00	
State Pennsylvania ZIP Code + 4 19102	11.b. Approximate dollar value of such dealing.	\$98
	12.a. Nature of interest held or income received.	<u>Succession in the second seco</u>
	12.b. Amount.	